11-28-05 PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE rwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 10/661,170 **Application Number** Filing Date September 11, 2003 **TRANSMITTAL** First Named Inventor Richard A. Holl **FORM** Art Unit 1723 **Examiner Name** Tony Glen Soohoo (to be used for all correspondence after initial filing) Attorney Docket Number 58035.013100 14 Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)					
Fee Transmittal Form	Drawing(s)	After Allowance Communication to TC			
Fee Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences			
Amendment/Reply	Petition Retition to Convert to a	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
After Final	Petition to Convert to a Provisional Application	Proprietary Information			
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter			
Extension of Time Request	Terminal Disclaimer	Other Enclosure(s) (please Identify below): Return Prepaid Postcard			
Express Abandonment Request	Request for Refund	Return repaid restourd			
Information Disclosure Statement	CD, Number of CD(s) Landscape Table on CD				
Certified Copy of Priority Document(s)	Remarks				
Response to Missing Parts/ Incomplete Application					
Response to Missing Parts under 37 CFR 1.52 or 1.53					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm Name Greenberg Traurig LLP Signature					
Printed name Peter J. Gluck					
Date November 23, 2005	No. 38,022				
CERTIFICATE OF TRANSMISSION/MAILING					
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Typed or printed name

Dorothy L. Chambers

November 23, 2005

PTO/SB/17 (12-04v2)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<u>\$</u>		Effective on 12/08/2004.		Complete If K		Kı
Foor	numa Land da di	he Consolidated Appropriations Act. 2005 (H.R. 4818	R) A	lingtion Number	1000	

TRANSMITTAL

for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

OTAL	AMOUNT	OF PAYMENT	(\$)200.00

C	Complete If Known		
Application Number	10/661,170		
Filing Date	September 11, 2003		
First Named Inventor	Richard A. Holl		
Examiner Name	Tony Glen Soohoo		
Art Unit	1723		
Attorney Docket No.	58035.013100		

TOTAL AMOUNT OF PA	YMENI	(\$)200.00	Alle	onley bucket No.	58035.0	713100	
METHOD OF PAYMEN	T (check all	that apply)					
Check Credit Card Money Order None Other (please identify):							
Deposit Account t	Deposit Account Deposit Account Number: 50-2638 Deposit Account Name: Peter J. Gluck						
For the above-iden	tified deposit	account, the Dire	ector is hereby a	uthorized to: (che	ck all that apply	·)	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION				_	<u>.</u>		
1. BASIC FILING, SEA	RCH, AND	EXAMINATIO	N FEES				
	FILING I		SEARCH		EXAMINA	TION FEES	
l <u>-</u>	_	Small Entity	5 (4)	Small Entity	F (A)	Small Entity	Food Boid (\$)
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	<u>Fee (\$)</u> 250	<u>Fee (\$)</u> 200	<u>Fee (\$)</u> 100	Fees Paid (\$)
Utility	300	150	500		130	65	
Design	200	100	100	50		-	
Plant	200	100	300	150	160	80 _	
Reissue	300	150	500	250	600	300 _	
Provisional	200	100	0	0	0	0 _	
2. EXCESS CLAIM FE	ES		_			<u>S</u> :	mall Entity
Fee Description						<u>Fee (\$)</u>	Fee (\$)
Each claim over 20 (inc						50	25
Each independent claim		luding Reissuc	es)			200	100
Multiple dependent clai		·	(¢)	-: (4)		360 Multiple Depe	180
Total Claims 20 - 20 or HP	Extra Cla	<u>ims Fee </u>	<u>(\$) Fees Pa</u> = 0	aid (\$)		Fee (\$)	Fee Paid (\$)
HP = highest number of total c	-						
Indep. Claims	Extra Cla	•	(\$) Fees Pa	aid (\$)			
5 - 3 or HP	= 2	× 100.00	= 200.00)			
HP = highest number of indepe	endent claims p	aid for, if greater th	nan 3				
3. APPLICATION SIZE	FEE						
If the specification							
listings under 37 C	FR 1.52(e))	, the application	on size fee due	is \$250 (\$125 f	or small entity	y) for each addi	tional 50
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50= (round up to a whole number) x							
4. OTHER FEE(S) Fee Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge):							
<u> </u>							

SUBMITTED BY Registration No. 38,022 Telephone 714 708-6507 Signature (Attorney/Agent) Date November 23, 2005 Name (Print/Type) Peter J. Gluck

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